PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/599,576

70111-10													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
U.S	. NATIONAL S	STAGE FEES	(COMMITT)		, ,			RATE	FEE		RATE	FEE	
BAS	IC FEE		SMALL ENT. = \$ 150		LARG	ARGE ENT. = \$ 300		SIC FEE		OR	BASIC FEE	300	
EXA	MINATION FEI	<u> </u>	Satisfies PCT An	٠,,		other situations = \$ 100 / \$ 200		AM. FEE			EXAM. FEE	200	
SEA	RCH FEE		U.S. is ISA = \$ ALL other cours \$ 200 / \$ 4	50 / \$ 100 ntries =	ALL of	other situations = \$ 250 / \$ 500		ARCH FEE			SEARCH FEE	400	
FEE FOR EXTRA SPEC. PGS.			1	ıs 100 =		/ 50 =		(\$125 =			X \$ 250 =	7	
тот	AL CHARGEAE	BLE CLAIMS	6 minus 20 = *					X \$ 25 =		OR	X \$ 50 =		
INDE	EPENDENT CL	AIMS	2) minus 3 = *				7	(\$100 =		OR	X \$ 200 =	7	
MUL	TIPLE DEPEN	DENT CLAIM PRI	ESENT					+ \$ 180 =		OR	+ \$ 360 =	/	
* If	the difference	in column 1 is	less than zero	o, enter "0" in column 2				TOTAL	·	OR	TOTAL	900	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		=	>	(\$100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ŀ	+ \$ 180 =		OR	+ \$ 360 =		
			TO	FEE	·	OR	TOTAL ADDIT. FEE						
		(Column 1)		(Colui	mn 2)	(Column 3)							
AT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		=	7	< \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	+ \$ 180 =		OR	+ \$ 360 =		
			TO	TAL ADDIT. FEE		OR	TOTAL ADDIT. FEE						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Barbara Campbell, PCT National Stage Division ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													